

2007–2008 Application for the Health Professions Student Loan for Admitted Pharmacy Students

Name: _____

Student ID : _____ Ole Miss Email : _____

Student's Local or Cellular Telephone Number: _____

Please circle your classification: P1 P2 P3 P4 P5 P6

The Health Professions Student Loan (HPSL) is a low-interest, long-term federal loan. It is a need-based award available to eligible undergraduate and graduate students in the health professions to help pay for their cost of education. HPSL is made possible by the Department of Health and Human Services (not the Department of Education like most federal financial aid programs such as Stafford Loans). HHS requires that parent income and asset information be reported on the Free Application for Federal Student Aid for all students including independent students (even graduate students). This requirement cannot be waived. In cases where the parents refuse to provide income information, an affidavit documenting such a refusal cannot be accepted in lieu of the required information. Unless the parents are deceased, a student who does not provide parental income information will not be considered for HPSL funds.

ALL STUDENTS -- INDEPENDENT AND DEPENDENT STUDENTS

1. Submit a 2007-2008 Free Application for Federal Student Aid (FAFSA) to the Federal Processor with all of your parents' information. All students must complete all questions in the parental section (Step Four). Although the Department of Education does not require parental information for independent students, the Department of Health and Human Services does. The parental information for independent students will not be used by the Department of Education to determine an independent student's Title IV aid eligibility. However, failure to fully complete the parental section will cause you to be ineligible for Title VII aid (HPSL).
2. Submit a 2007-2008 HPSL application to the Office of Financial Aid.
3. Submit a signed copy of your parents' 2006 Federal Income Taxes and copies of your parent's W-2's with this application. If your parents are deceased, please submit copies of their death certificates.

SINGLE STUDENTS

1. If you are single, submit a signed copy of your 2006 Federal Income Taxes and copies of your W-2's with this application.

MARRIED STUDENTS

1. If you are married and filed jointly, submit a signed copy of your 2006 Federal Income Taxes and W-2's and your spouse's W-2's with this application.
2. If you are married and you and your spouse filed separately, submit a signed copy of your 2006 Federal Income Tax Form, a signed copy of your spouse's 2006 Federal Income Tax Return, copies of your W-2's, and copies of your spouse's W-2's with this application.

Student/Spouse	WORKSHEET A REPORT 2006 ANNUAL AMOUNTS	Parent(s)
\$	Earned Income Credit from IRS form: Form 1040- Line 66a; 1040A- line 40a; 1040 EZ-line 8a	\$
\$	Additional child tax credit from IRS form: Form 1040-Line 68; 1040A- line 41	\$
\$	Welfare Benefits including TANF. Do not include Food stamps or subsidized housing	\$
\$	Social Security Benefits received for all household members that were not taxed	\$
\$	TOTAL	\$

Student/Spouse	WORKSHEET B REPORT 2006 ANNUAL AMOUNTS	Parent(s)
\$	Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings), including, but not limited to, amounts reported on the W-2 Form in Boxes 12a through 12d, codes D, E, F, G, H and S	\$
\$	IRA deductions and payments to self-employed SEP, SIMPLE, and Keough and other qualified plans from IRS Form 1040-total of lines 28+32 or 1040A-line 17	\$
\$	Child support received for all children. Do not include foster children or adoption payments	\$
\$	Tax exempt interest income from IRS Form 1040-line 8b or 1040 A- line 8b	\$
\$	Foreign income exclusion from IRS Form 2555-line 45 or 2555EZ-line 18	\$
\$	Untaxed portions of IRA distribution from IRS Form 1040-lines (15a minus 15b) or 1040A-lines (11a minus 11b) . Exclude rollovers. If negative, enter zero.	\$
\$	Untaxed portions of pensions from IRS Form 1040-lines (16a minus 16b) or 1040A-lines (12a minus 12b) . Exclude rollovers. If negative, enter zero.	\$
\$	Credit for federal tax on special fuels from IRS Form 4136- line 20 (<i>non farmers only</i>)	\$
\$	Housing, food, and other living allowances paid to members of the military, clergy, and others (including cash payments and cash value of benefits)	\$
\$	Veterans' noneducation benefits such as Disability, Death Pension, or Dependency & Indemnity compensation (DIC), and/or VA Educational Work-Study Allowances	\$
\$	Any other untaxed income or benefits not reported elsewhere on Worksheets A and B, such as workers' compensation, untaxed portions of railroad benefits, Black Lung Benefits, disability, etc. DO NOT include student aid, Workforce Investment Act educational benefits, or benefits from flexible spending arrangements such as cafeteria plans.	\$
\$	Money received, or paid on your behalf not reported elsewhere on this form	\$
\$	TOTAL	\$

Student/Spouse	WORKSHEET C REPORT 2006 ANNUAL AMOUNTS	Parent(s)
\$	Education Credits (Hope and Lifetime Learning credits) from IRS Form 1040-line 50 or 1040 A- line 31	\$
\$	Child support you paid because of divorce or separation or as a result of a legal requirement. Do not include support for children in your household.	\$
\$	Taxable earnings from need-based employment programs, such as Federal Work-Study and need based employment portions of fellowships and assistantships	\$
\$	Student grant and scholarship aid reported to the IRS in your or your parents' adjusted gross income. Includes AmeriCorps benefits, as well as grant or scholarship portions of fellowships and assistantships	\$
\$	TOTAL	\$

Student/Spouse	WORKSHEET D	Parent(s)
\$	As of today, what is the total current balance of cash, savings, and checking accounts?	\$
\$	As of today, what is the net worth of investments including real estate (not including primary residence)? Net worth means current value minus debt.	\$
\$	As of today, what is the net worth of current businesses and/or investment farms? Do not include a farm on which the student/spouse or the parent lives and operates.	\$

Household Information: Please include your parents, your siblings, your spouse, and your children.

Full Name	Age	Relationship	College if Applicable
		student	University of Mississippi

All of the information that I am submitting is true and complete to the best of my knowledge. I understand that if I purposely give false or misleading information that I may be subject to a \$20,000 fine, a prison sentence, or both.

Student's signature Date

Parent's signature Date

Return completed forms to: The Office of Financial Aid, Post Office Box 1848, University, MS 38677